PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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19

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| Application Number | 10/617,624 | | |
|------------------------|------------------|--|--|
| Filing Date | July 10, 2003 | | |
| First Named Inventor | Eduardo BLUMWALD | | |
| Art Unit | 1638 | | |
| Examiner Name | V. Kumar | | |
| Attorney Docket Number | 595792000300 | | |

| ENCLOSURES (Check all that apply) | | | | | | |
|---|--|---|---|--|--|--|
| X Fee Trans pgs) | mittal Form IN DUPL (2 | Drawing(s) | After Allowance Communication to TC | | | |
| Fee / | Attached | Licensing-related Papers | Appeal Communication to Board of Appeals and Interferences | | | |
| x Amendmer 9/28/05 - 1 | nt/Reply Resp to OA of 3 pgs | Petition | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | | |
| After | Final | Petition to Convert to a Provisional Application | Proprietary Information | | | |
| Affid | avits/declaration(s) | Power of Attorney, Revocation Change of Correspondence Address | Status Letter | | | |
| X Extension | x Extension of Time Request (1 pg) Terminal Disclaimer | | X Other Enclosure(s) (please Identify below): | | | |
| Express Abandonment Request Request for Refund | | Request for Refund | EXHIBIT 1: Citation No. 37 - (M. Apse, et al., "Cloning and characterization of plant | | | |
| Information Disclosure Statement | | CD, Number of CD(s) | | | | |
| Certified C Document | opy of Priority (s) | Landscape Table on CD | sodium/proton antioports", 11th Int'l Workshop on Plant - 1 pg | | | |
| | | | | | | |
| Reply to Missing Parts/ Incomplete Application Remarks | | | | | | |
| Reply to Missing Parts under | | | | | | |
| | | | | | | |
| | | | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| Firm Name MORRISON & FOERSTER LLP | | | | | | |
| Signature Wichael Pulve | | | | | | |
| Printed name | Michael R. Ward | • | | | | |
| Date | January 30, 2006 | Reg. No. | 38,651 | | | |
| | | | | | | |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 731 515 138 US, in an envelope addressed to: MS: AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. (Lilia Olsen) Dated: January 30, 2006 Signature

EV731515138US

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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| Effective on 12/08 | Complete if Known | | | | | | |
|---|-------------------------------|---|----------------------|-------------------------|--|--|--|
| Fees pursuant to the Consolidated Appro | Application Number | 10/617,624 | | | | | |
| FEE TRANS | Filing Date | July 10, 2003 | | | | | |
| For FY 2 | First Named Inventor | | Eduardo BLUMWALD | | | | |
| FOFFY 2 | Examiner Name | V. Kumar | | | | | |
| X Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | 1638 | | | | |
| TOTAL AMOUNT OF PAYMENT | Attorney Docket No. | 595792000300 |) - | | | | |
| METHOD OF PAYMENT (check | all that apply) | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | |
| x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP | | | | | | | |
| For the above-identified dep | osit account, the Director | s hereby authorized to: (cl | neck all that apply) | | | | |
| x Charge fee(s) indicate | d below | Charge fee(s) | indicated below, ex | cept for the filing fee | | | |
| Charge any additional | fee(s) or underpayment of | TX Credit any ove | mayments | • | | | |
| X Charge any additional fee(s) or underpayment of Ee(s) under 37 CFR 1.16 and 1.17 | | | | | | | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND E | | ADOLLETTO EVAL | INATION FEES | | | | |
| } · | ILING FEES SE Small Entity | ARCH FEES EXAN Small Entity | Small Entity | | | | |
| Application Type Fee (| | | | Fees Paid (\$) | | | |
| Utility 300 | 150 500 | 250 200 | 100 | 0 | | | |
| Design 200 | 100 100 | 50 130 | 65 | | | | |
| Plant 200 | 100 300 | 150 160 | 80 | | | | |
| Reissue 300 | 150 500 | 250 600 | 300 | | | | |
| Provisional 200 | 100 0 | 0 0 | 0 | | | | |
| 2. EXCESS CLAIM FEES Small Entity | | | | | | | |
| Fee Description Fee (\$) Fee (\$) 50 25 | | | | | | | |
| Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 | | | | | | | |
| Multiple dependent claims 360 180 | | | | | | | |
| Total Claims Extra Claims | Fee (\$) Fee | Paid (\$) | Multiple Depende | ent Claims | | | |
| 18 -21 0 | x = | 0 | | Fee Paid (\$) | | | |
| | | | | 0 | | | |
| indep. Claims Extra Claims | Fee (\$) Fee | Paid (\$) | | _ | | | |
| 2 - 3 0 x = 0 | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | |
| - 100 = /50 (round up to a whole number) x = | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month 60.00 | | | | | | | |
| SUBMITTED BY | | | | | | | |
| Signature . Michael | Phlam | Registration No. (Attorney/Agent) 38,65 | 1 Telephone | (415) 268-6237 | | | |
| Name (Print/Type) Michael R. Ward | | [Cariomolic Rond) | Date | January 30, 2006 | | | |
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